

## STATES PATENT AND TRADEMARK OFFICE

RECEIVED

In re application of: Hastings et al.

MAY 2 1 2001

Application Serial No.: 09/037,460

Art Unit: 1647

TECH CENTER 1600/2900

Filed: March 10, 1998

Examiner: Saoud, C.

For:

Human Vascular IBP-Like Growth Factor

Polynucleotides (as amended)

Attorney Docket No.: PF147D1

## NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Commissioner for Patents Washington, D.C. 20231

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the Examiner, dated December 15, 2000, which finally rejected claims 54-67, 75-92, 102-107, 115-119, and 122-175 of the above-identified application.

Please charge the required fee of \$310.00, and any other fees deemed necessary, to Deposit Account No. 08-3425.

Respectfully submitted,

Dated: (144 15, 2001

(Reg. No. 41,119)

Attorney for Applicants

Human Genome Sciences, Inc.

9410 Key West Avenue Rockville, MD 20850 Phone: (301) 251-6015

JLK/CCB/ba

05/17/2001 CNGUYEN 00000023 083425 09037460

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FEE TRANSMITTAL  MAY 1 5 2001 5 for FY 2001								Complete if Known							eL)
Patent fees are subject to annual revision.														ᆏ	
X								Application Number					09/037,460		
TRAUCHAT								Filing Date					March 10, 1998		
								First Named Inventor					Hastings e	t al.	MAY
								Examiner Name					Saoud, C	= =	22
								Group Art Unit					1647	3	1-1
Total am	ount of p	ayment			\$	700.00	Attorney Docket Number						PF147D	1	
METHOD OF PAYMENT (CHECK ONE)										FEI	E CALCULATIO	N (CONTIN	UED)	8	2001
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Deposit Account U8-3425 Number							Code	(\$)	Fee Code	Fee (\$)	Fee Description		Fee Paid		
Deposit Account Human Genome Sciences, Inc. Name							105	130	205	65	Surcharge - late i	filing of Oath o	or Declaration		
							127	50	227	25	Surcharge - late p	orovisional fili			
☐ Charge Any Additional Fee Required							139	130	139	130	Non-English spec	cification			
Under 37 CFR §§ 1.16 and 1.17						147	2,520	147	2,520	For filing a reque	est for ex parte				
							112	920	112	920		cation of SIR	prior to Examiner		
Applicant claims small entity status								1,840	113	1,840	action Requesting publi action	cation of SIR	after Examiner		
See	37 CFF	R 1.27					115	110	215	55	Extension for rep	ly within first	month		
							116	390	216	195	Extension for rep	ly within seco	nd month	\$390	.00
2. Payment Enclosed:							117 118	890	217	445	Extension for rep	-			
☐ Check ☐ Credit Card ☐ Money Order ☑ Other								1,390	218	695	Extension for rep	•			
Charge any deficiencies or credit any overpayments in the fees or fee calculations of Parts 1, 2 and 3 below to Deposit Account No. 08-3425								1,890	228	945	Extension for rep	oly within fifth	month		
								310	219	155	Notice of Appeal	l		\$310	.00
FEE CALCULATION								310	220	155	Filing a brief in s	upport of an a	ppeal		
1. BASIC FILING FEE							121	270	221	135	Request for oral	hearing			
Large	Entity	Small	Entity	Fee	_	Fee Paid	138	1,510	138	1,510	Petition to institu	te a public use	proceeding		
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Description	1	Pato									
101	710	201	355	Utility filing	g fee		140	110	240	55	Petition to revive	-unavoidable			
106	320				141	1,240	241	620	Petition to revive		al				
107 108	490 710	207 208	245 355	Plant filing Reissue filir			142 143	1,240 440	242 243	620 220	Utility issue fee ( Design issue fee	or reissue)			
114	150	214	75	Provisional	-		144	600	244	300	Plant issue fee				
70.00					122	130	122	130	Petitions to the C						
Subtotal (1) \$0.00							123 126	50 180	123 126	50 180	Petitions related	-			
2. EXTRA CLAIM FEES								40	481	40	Recording each p		closure Statement		··
a bitter chain i bbo						581				(times number of		om per property			
				Extra	Fee from	Fee Paid	146	710	246	355	Filing a submissi (37 CFR 1.129(a		ejection		- O
Total clair	ms		- 20"		below \$18.00	s	149	710	249	355		al invention to	be examined (37		
Indep.clair			- 3"		\$80.00	S	179	710	279	355	CFR 1.129(b)) Request for Cont	inued Examina	ation (RCE)	<b>/</b>	
Multiple	-					\$	169	190	169	900	Request for expe				
Dependent	· _		-				01. 6	. (			application				
Large	Entity	Small	Entity	Fee				e (specify): (specify):	i				100		
Fee	Fee	Fee	Fee	Description	on		Other led	e (specify):							
Code	(\$)	Code	(\$)	1											
103	103 18 203 9 Claims in excess of 20						Reduced by Basic Filing Fee Paid								
103	80	202	40			excess of 3									
104	270	204	135		iependent cl		1								
108	80 209 40 **Reissue independent claims over original patent														
110 18 210 9 **Reissue claims in excess of 20 and over original patent						Subtotal (3)							\$700	.00	
Subtotal (2) \$0.00															
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Submitted By													Co	omplete (if app	olicable)
Name (	Print/Type	Jonatha	n L. Kle	in			Registration No.: 41,119						Telephone (301) 251-6015		
Signatu	ro: /	2	12	11	0.								Date M	15 70	0.7